8:20-cv-00394-BCB-MDN Doc # 44-3 Filed: 02/05/21 Page 1 of 1 Page 1D # 226 RETURN U.S. Department of Justice

See "Instructions for Service of Process by U.S. Marshal" United States Marshals Service

PLAINTIFF						COURT CASE NUMBER		
DEFENDANT						TYPE OF PROCESS		
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE								
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)								
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW						Number of process to be served with this Form 285		
						Number of parties to be served in this case		
						Check for service on U.S.A.		
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):								
Signature of Attorney other Originator requesting service on behalf of: DEFENDANT TELEPHONI DEFENDANT						NUMBER DATE		
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE								
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No.	District to Serve No.	Signature of Authorized USMS Deputy or Clerk Date				
I hereby certify and return that I \square have personally served, \square have legal evidence of service, \square have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.								
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)								
Name and title of individual served (if not shown above)						Date	Time	am pm
Address (complete only different than shown above)						Signature of U.S. Marshal or Deputy		
Costs shown on attached USMS Cost Sheet >>								

REMARKS